

# Psychiatric Residential Treatment Facilities: Attestation Requirements

---

South Carolina Department of Health and Human Services  
Division of Behavioral Health  
2021

# Disclaimer

- Materials presented today are not comprehensive. This training does not take the place of reading the provider policy and procedure manual. Prior to treatment, all beneficiaries must meet the medical necessity criteria for that service. All information in this presentation pertains to South Carolina Department of Health and Human Services Healthy Connections (SCDHHS) Medicaid beneficiaries.

# Purpose of the Orientation

- To act as a guide for Psychiatric Residential Treatment Facilities (PRTF) providers who are learning about South Carolina Medicaid policy and procedures prior to rendering PRTF services.
  - While this presentation is designed to enhance understanding of the Medicaid Standards regarding the Psychiatric Hospital Services Manual, all aspects and policy are not covered in this presentation. Please review the Psychiatric Hospital Services Manual and the Administrative and Billing Manual.
- To help providers avoid potential Medicaid recoupment.

# Objectives

At the completion of this presentation, providers will be able to:

1. Gain a better understanding of the structure, characteristics, policies and procedures regarding a PRTF.
2. Identify regulatory requirements for PRTFs.

# Attestation Requirements

- Each PRTF must attest in writing to SCDHHS that the facility is in compliance with the conditions of participation on an annual basis. Letters of attestation of compliance must be issued by each PRTF prior to July 21 of each year.
- Attestation letters must be mailed to:

SCDHHS Division Behavioral Health

Attention: Attestation

Post Office Box 8206

Columbia, SC 29202-8206

# Attestation Requirements (cont.)

- Letters of attestation must include the following information:
  - Facility General Characteristics:
    - Name
    - Address
    - Telephone Number
    - Fax Number
    - Medicaid Provider Number and NPI

# Attestation Requirements (cont.)

- Facility Specific Characteristics:
  - Bed Size
  - Number of children currently served within the PRTF who receive services based on their eligibility for the Medicaid inpatient psychiatric services for children under age 21 benefits
  - Number of children, if any, whose Medicaid inpatient psychiatric services for children under age 21 benefits are paid for by any state other than South Carolina
  - A list of all states from which the PRTF has ever received Medicaid payment for providing inpatient psychiatric services for children under age 21

# Attestation Requirements (cont.)

- Signature of the Facility Director
- Date the attestation was signed
- A statement certifying that the facility currently meets all the requirements under 42 CFR Subpart G § 483 governing the use of restraint and seclusion
- A statement acknowledging the right of DHEC (or its agents or that State Health Licensing agent) and, if necessary, Centers for Medicare and Medicaid Services (CMS) to conduct an onsite survey at any time to validate the facility's compliance with the requirements of the rule, to investigate complaints lodged against the facility or to investigate serious occurrences



# Attestation Requirements (cont.)

- An annual statement and acknowledgement that the facility will submit a new attestation of compliance in the event that the individual who has the legal authority to obligate the facility is no longer in such a position.
- A statement certifying that the facility currently meets the Certification of Need requirements as identified under 42 CFR § 441 governing Subpart D – Inpatient Psychiatric Services for children under age 21 in Psychiatric Facilities Programs.

# Sample Attestation Letter

- Facilities can find a sample attestation letter in the forms section of the Psychiatric Hospital Services Manual:  
<https://www.scdhhs.gov/provider-type/psychiatric-hospital-services-manual-070119-edition-posted-070119>

